

PGME COMMITTEE MEETING MINUTES			
	Date: Wednesday, December 16, 2020 (ad hoc meeting)	Time: 07:00 – 08:00	Location: Teleconference
MEETING CALLED BY	L. Champion, Associate Dean, Postgraduate Medical Education		
ATTENDEES	V. Beletsky, P. Bere, K. Carter, A. Cave, A. Cheng, J. Copeland, G. Eastabrook, S. Elsayad, A. Florendo-Cumbermack, K. Fung, S. Gryn, A. Haig, N. Huda, A. Huitema, Y. Iordanous, H. Iyer, T. Khan, G. Kim, J. Laba, D. Laidley, P. Leong-Sit, E. Lovett, A. Lum, S. Macaluso, K. MacDougall, M. Marlborough, B. Moote, D. Morrison, A. Mullen, M.L. Myers, C. Newnham, M. Ngo, S. Northcott, M. Ott, K. Potvin, S. Pritchett, M. Qiabi, B. Rotenberg, H. Salim, V. Schulz, M. Sharma, J. Thain, T. Van Hooren, P. Wang, J. Wickett, M. Weir, C. Yamashita <b>Hospital Rep</b> : S. Fahner; <b>PARO Reps:</b> M. Cookson, K. Desai; <b>P.A. Exec Rep</b> : C. Sikatori, <b>Guests:</b> P. Morris, K. Trudgeon		
REGRETS	W. Sischek		
NOTE TAKER	Andrea Good, andrea.good@schulich.u	iwo.ca	

CALL TO ORDER (7:00 AM) & APPROVAL OF AGENDA/MINUTES			
DISCUSSION	A Royal College Exams Update was added to the agenda. A request to add community electives discussions regarding COVID-19 was requested by B. Moote. This will be added to the COVID-19 discussion. Agenda, Minutes – Motion to accept agenda approval (B. Rotenberg, M. Ott), Approved		
ANNOUNCEMENTS			
QUEEN'S UNIV	QUEEN'S UNIVERSITY ELECTIVES L. CHAMPION		
DISCUSSION	<ul> <li>Outgoing and incoming electives will continue with conditions: <ul> <li>If a trainee is going to Queen's from red or grey zones, or outside of the province, there is a mandatory quarantine period (7 days with a swab on Day 7).</li> <li>A negative test and being asymptomatic means that the trainee can begin training on Day 8 (or as soon as possible after a negative test).</li> <li>Working in isolation from Day 8 to 14 is required once a trainee is cleared to begin work.</li> </ul> </li> <li>There are no other elective cancellations across Canada at this point. Electives continue but with restrictions (either provincial or University-based); i.e. restrictions are in place for Atlantic Canada (travel restrictions and a 14-day self-isolation).</li> <li>Any trainee going on electives must be aware of the implications. It may be best to avoid electives at the moment.</li> <li>Currently, there are no restrictions on trainees coming to London; however, we have very few electives happening at the moment. Electives that are occurring are at one site only (and not UH).</li> </ul>		
UPDATES			

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PARO UPDATE	M. COOKSON			
DISCUSSION	<ul> <li>Residents who are ill or symptomatic fall under the sick leave requirements of PARO and should not be given a work/independent study plan. Residents who are on self-isolation, or asymptomatic but test positive, may complete a work plan or independent learning plan.</li> <li>Work plans, in any situation, are not a requirement. Program Directors and trainees can discuss whether to move forward with a plan, or a trainee can create an independent learning plan (benefits the CanMEDS Scholar role), but it is not required. If a trainee is in isolation but not sick, it may help them avoid a leave of absence. Ultimately, the best way to move forward should be determined through discussions between the Program</li> </ul>			
CARMS UPDAT	Director and the trainee.			
DISCUSSION	<ul> <li>Revisions to PGY1 CaRMS 2022 dates were made in December. The match will be virtual and delayed in time relative to what has happened in the past.</li> <li>First iteration match dates will begin in January 2022 with three weeks of interviews and continue until mid-April 2022. Second iteration match day will be Thursday, May 12, 2022. This does not give a long turnaround time to get everyone organized with the CPSO by July 1.</li> <li>Interview guides are available on the PGME website for both <u>applicants</u> and for <u>programs</u>.</li> </ul>			
ROYAL COLLE	GE EXAMS L. CHAMPION			
DISCUSSION	<ul> <li>The Royal College no longer has paper-based exams, beginning Spring 2021. Written exams will be administered at a test centre using the Practique Platform. Oral examinations are virtual, but also at test centres (no practical, no OSCE).</li> <li>There are options for at-home delivery with remote proctoring (i.e. for quarantine, isolation, accommodation or IMG travel restrictions). This can be considered up to the day before the exam if a trainee is no longer able to attend a test centre.</li> <li>Links for the royal college exam information:         <ul> <li>Examination Dates - Spring</li> <li>Examination Locations</li> <li>Examination Locations</li> <li>Exam delivery details</li> <li>Discipline-specific exam format details</li> </ul> </li> <li>No new updates for the MCC exams.</li> </ul>			
NEW BUSINESS				
ASSESSMENT	VERIFICATION PERIOD (AVP) POLICY L. CHAMPION			
DISCUSSION	<ul> <li>The AVP is a 12-week period of assessment to determine if an IMG candidate can function at an appointed level of training. It requires multiple assessments, including a 2-week, mid-rotation by 8 weeks week, and final assessment at week 12. This can be extended. AVP training time (if successful) counts toward their residency training time.</li> <li>These residents are most often Canadians who have studied abroad and who have entered through the CaRMS match.</li> <li>Difference between PEAP and AVP:         <ul> <li>PEAP is a mandatory assessment to determine if an IMG can function at the appointed level of training prior to full acceptance into a medical program. IMGS plan to return to home country after completion</li> <li>The assessment period does not count toward training, and there is no basis for appeal except regarding process issues.</li> <li>Must ensure there are assessments and written feedback on a regular basis, minimum of four weeks, max of 12 weeks</li> </ul> </li> </ul>			

	<ul> <li>Ensure the candidates selected through the PEAP are strong candidates. Be very clear through written assessments about any issues. Not providing written documentation (assessments and feedback) is a process issue, which can be appealed.</li> <li>The AVP policy was old and required updating. Updates include aligning the policy with the 2016 COFM policy and with PGME's Assessment and Appeals policy. A flow sheet was also created to more clearly explain the AVP process.</li> <li>Motion to approve. Accepted: N. Huda, K. Fung</li> <li>Next step: ECSC on January 8, 2021</li> </ul>
TRANSFER PC	LICY L. CHAMPION
	<ul> <li>This policy has been updated to include, and be consistent with, the 2019 Transfer Policy (Canada-wide agreement)</li> <li>Eliminated information that was inconsistent with current practice.</li> <li>That timing of the transfer is a decision between the two Program Directors who are approving the transfer. Residents can have input, but it is ultimately not their decision.</li> <li>Motion to approve. Accepted: N. Huda, B. Rotenberg.</li> <li>Next step: ECSC on January 8, 2021</li> <li>FYI there several policies that require updating and some that need to be developed. Fatigue risk management and virtual care are on the development list.</li> </ul>
COVID-19 UPDA	TE – UNIVERSITY HOSPITAL (UH) L. CHAMPION
DISCUSSION	<ul> <li>Updates regarding University Hospital (UH) Outbreak: <ul> <li>Operating room limits to urgent/emergent and ambulatory clinic restrictions continue (7-day restriction).</li> <li>24 additional VH beds are being set up to accommodate medicine patients, with a planned opening for 26 additional VH beds and 18 ICU beds if required. Only after that point would a field hospital be opened.</li> <li>This is all being reassessed twice weekly.</li> <li>ICU occupancy is high at both sites.</li> </ul> </li> <li>There is a huge impact on call schedules and rotations right now. The Royal College has been very clear about flexibility within our CBD and time-based programs. If residents are on a block and can only be participating for two weeks, then generally there is enough time to get a sense of a resident's performance. Program Directors are encouraged to be as flexible as possible.</li> <li>A question was raised about electives in the community and at other institutions (added agenda item) and if any guidance was available on whether electives should be taken now and later in the spring. Other centres are taking trainees at this point, and they may have isolation or quarantine requirements that must be followed. However, travel across Canada is still not recommended unless necessary right now. L. Champion has suggested that electives taking place in Jan/Feb 2021 be cancelled as the situation is rapidly changing and requirements/restrictions could change. However, it is not a formal rule.</li> <li>If the elective is taking place later in the Spring, it may be worth leaving it as scheduled. Things may have calmed down by that point (i.e. all healthcare practitioners may have been vaccinated, etc.).</li> <li>Does anyone know the criteria for determining when movement between sites will return to normal for training purposes? When the last non-socomial transmission date has occurred, the clock is set for two weeks.</li> <li>Two outbreaks have been declared at VH; however, they are limited. There have been outbreaks at</li></ul>

	cohort to a single site as much as possible. We know this will not be possible for some programs. The cohorting recommendations will be in place for some time. If surgery opens at UH, all 3- and 4-bed rooms will have a maximum occupancy of 2 beds, which will take 43 beds out of service. Are there any restrictions in our distributed education networks or at Windsor? At this point Windsor is still scheduling placements, but everything is being considered daily and A. Mulen or L. Jacobs will notify everyone if the situation changes. UH is unique with respect to lockdown measures and rules about self-isolation at this point; no other distributed education centres have notified PGME of a change in accepting placements. What are the requirements for testing? There are situations where clerks and residents are hearing different information from Occupational Health. UH is doing testing behind auditorium C, which some people have not been comfortable visiting. External testing sites (Carling, Oakridge) can be visited but Oakridge will be closed for about one week over the holidays. Medical Affairs has been reaching out to physicians and residents to ensure those who need to be tested are being tested as required. A patient may be found to be COVID-19 positive after admission and as a result was not in isolation the whole time or enhanced PPE was not used by the healthcare workers. At that point, the level of risk might be higher than zero and those people may be asked to get tested. The question of testing asymptomatic people has been unclear since the beginning, because a negative test does not mean that a person is not incubating COVID-19. It is unclear when the best time is to test someone who has been exposed and is asymptomatic. Infection control is discouraging asymptomatic testing right now because it clogs the system and more testing is being done that ever. However, there are currently no formal restrictions on testing, so if a trainee was tested a week prior and concerned again, they can request another test
	last minute. Thank you for the hard work and management of disruptions and uncertainty. This is J. Wickett's last meeting as Program Director of Family Medicine. She has been PD for 7.5 years and L. Champion wants to thank her for her genuine leadership and support for the program. She is spoken of very highly by the residents. The PGME Committee will welcome the new FM Program Directors in the new year.
	:58) AND NEXT MEETING
DATE AND TIME	Next Meeting: Wednesday, January 13 <sup>th</sup> , 2021, 0700 – 0800 by Teleconference